

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ML		06-04-01
O.I.P.E. CLASSIFIER		2	6/13/01
FORMALITY REVIEW	H.L.	1079	07/30/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	12/13/2003
2	✓	✓	12/13/2003
3	✓	✓	12/13/2003
4	✓	✓	12/13/2003
5	✓	✓	12/13/2003
6	✓	✓	12/13/2003
7	✓	✓	12/13/2003
8	✓	✓	12/13/2003
9	✓	✓	12/13/2003
10	✓	✓	12/13/2003
11	✓	✓	12/13/2003
12	✓	✓	12/13/2003
13	✓	✓	12/13/2003
14	✓	✓	12/13/2003
15	✓	✓	12/13/2003
16	✓	✓	12/13/2003
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18	✓	✓	12/13/2003
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21	✓	✓	12/13/2003
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47	✓	✓	12/13/2003
48	✓	✓	12/13/2003
49	✓	✓	12/13/2003
50	✓	✓	12/13/2003

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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7/31